Great Lakes, Great Times, Great Outdoors www.michigan.gov/dnr

UPPER PENINSULA CITIZEN ADVISORY COUNCIL NOMINATION APPLICATION

Requested by the Michigan Department of Natural Resources.

APPLICANT INFORMATION					
Applicant's Name (Last, First, M.I.)			Telephone ()	Date of Birth
Street Address			E-mail Address		
City	State	ZIP	County of F	Residence	
Describe your experience working with (attach additional sheets, if necessary)	th fisheri	es, wildlife, fo	restry, pa	rks, or recreation issu	ues and programs:
Describe your experience working in groups or with individuals to reach cooperative solutions:					
Please list your experience as a representative of any work group, committee, council, etc.:					
In your experience as a representative of the above, describe what worked and what didn't work:					
What are your personal outdoor interest	ests?				

Return completed application to: Upper Peninsula Field Deputy

Marquette Operations Service Center

Michigan Department of Natural Resources

1990 U.S. 41 South Marquette, MI 49855